# PHA 5-Year and Annual Plan U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information			11000	•										
	PHA Name: The Housing Authority of the			PHA Code: MO00	6										
	PHA Type: Small High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	HCV (Section 8)											
	PHA Fiscal Year Beginning: (MM// Y Y Y Y ).	1/1/2010	<del></del>												
2.0	Inventory (based on ACC units at time of F	Y beginning	in 1.0 above)												
	Number of PH units: 70			CV units: <u>265</u>											
3.0	Submission Type		_												
	✓ 5-Year and Annual Plan		Plan Only	5-Year Plan Only											
4.0	DY Committee of the Com	III C	(0) 1 1 (0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		.1										
	PHA Consortia	HA Consorti	a: (Check box if submitting a join	nt Plan and complete table be	elow.)										
		PHA	Program(s) Included in the	Programs Not in the	No. of Unit	s in Each									
	Participating PHAs	Code	Consortia	Consortia	Program	T									
]					PH	HCV									
Ī	PHA 1:														
	PHA 2:					<u> </u>									
5.0	PHA 3: 5-Year Plan. Complete items 5.1 and 5.2 or	ly of 5-Veor	Dian undate												
5.0	5-Year Flan. Complete tems 5.1 and 5.2 of	ny at 3-1 car	Fran apuate.												
5.1	Mission. State the PHA's Mission for serving jurisdiction for the next five years:	ng the needs	of low-income, very low-income	, and extremely low income	families in the P	HA's									
	To provide decent safe and sanit	arv housii	na to low income familie	s and encourage Far	nilv										
<b>5</b> 2	, ,		•	•		a and tramt									
5.2															
	Self Sufficiency enabling families to be independent and no longer in need of public assistance.  Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.														
	-														
	See attached														
6.0	PHA Plan Update														
	(a) Identify all DIIA Plan alamanta that have		A Let the DITA simpo its lost A mou	ol Dian submission:											
	(a) Identify all PHA Plan elements that hav	e been fevise	d by the PHA since its last Allilu	iai Pian Sudinission:											
	Figure at a home and does to ADE	3.4													
	Elements changed due to ARF	KA													
	(b) Identify the specific location(s) where the	e nublic max	obtain conies of the 5-Vear and	Annual DHA Plan For a con	nalete list of PH	A Plan									
	elements, see Section 6.0 of the instructi		obtain copies of the 3-1 car and	Allitudi Fria Frant. Por a con	inpicte fist of F11	A Flair									
	oromonio, doo bootion o,o bi the instruction	OID.													
	Copies of the Five Year Plan an														
	St. Charles , Missouri 63301 and	d at the S	t. Charles City Hall at 20	00 South Main, St. Ch	narles, Miss	ouri									
	53301. All policies and procedu	res are av	/ailable at the Housing	Authority Office.											
			_	•											
7.0	Hope VI, Mixed Finance Modernization o	r Develonm	ent. Demolition and/or Disposit	tion, Conversion of Public I	Housing, Home	ownershin									
/••	Programs, and Project-based Vouchers.				B,	оп,									
8.0	Capital Improvements. Please complete P	arts 8.1 throu	gh 8.3, as applicable.												
0 1	Capital Fund Program Annual Statement	/Performane	e and Evaluation Report. As p	part of the PHA 5-Year and A	Annual Plan, ann	ually									
8.1	complete and submit the Capital Fund Prog	ram Annual i	Statement/Performance and Eval	luation Report, form HUD-50	0075.1, for each	current and									
	open CFP grant and CFFP financing.														
		D1	4 - C21 1 1	I Dian DITA	and and the second										
8.2	Capital Fund Program Five-Year Action Program Five-Year Action Plan, form HUD														
	for a five year period). Large capital items r				ront year, and ac	ia iaicsi yeal									
	10. 4 1170 Jose periody. Dange capital fichis i	De meiu	and it is a real transmit it	••											
8.3	Capital Fund Financing Program (CFFP)	•													
	Check if the PHA proposes to use any po		apital Fund Program (CFP)/Repl	lacement Housing Factor (RI	IF) to repay deb	t incurred to									
	finance capital improvements.														

9.0 Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Preservation of affordable units; affordable rental development; renter education and project based assistance. Specifically addressing the aging inventory of housing and maintenance improvements.

9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

The city of St. Charles inspects our Low Rent units each time there is a turnover. We have hired a new HQS inspector who is extremely knowledgeable and efficient. Our voucher briefing class that is held when the waiting list is worked, addresses portability issues. Our Welcome Program for Low Rent housing addresses the importance of reporting maintenance issues and maintaining safe and healthy living conditions.

- 10.0 Additional Information. Describe the following, as well as any additional information HUD has requested.
  - (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

The SCHA Plan has met it's original mission and exceeded the goals from our previous Five Year Plan. Community Room and Laundromat were completed as planned for less than originally anticipated. Closet doors and pickup truck were postponed to enable the partial replacement of HVAC systems (30) and security system consisting of 12 cameras and video monitor. We have had in excess of one family per year graduate from our Section 8 FSS Program. Last year we began the ROSS FSS Program.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

The SCHA defines significant amendment or modification to the annual plan as significant changes in the ACOP, Capital Fund Programs or any activities that fundamentally change the mission, goals, objective or plans of the Authority that are not required by HUD regulations.

The SCHA defines substantial deviation as major changes in policy or plans that will significantly alter the mission, goals or objectives of the Authority and which will require formal approval of the Board.

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## **Instructions form HUD-50075**

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

#### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

#### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

#### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

#### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

#### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- 5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- 5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- 6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
  - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
  - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

## PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
  - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
  - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo\_dispo/index.c

Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert;
2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <a href="http://www.hud.gov/offices/pih/centers/sac/conversion.cfm">http://www.hud.gov/offices/pih/centers/sac/conversion.cfm</a>

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
  - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
    - (a) To submit the initial budget for a new grant or CFFP;
    - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
    - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.
- 8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the Capital Fund Program Five-Year Action Plan (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm

- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- 10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:
  - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments.
  - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.



MO006 – Housing Authority of the City of St. Charles

5.2

Goals for 2010-2014

Complete replacement of HVAC systems begun two years ago. Install closet doors that had to be postponed in order to replace HVAC systems. Complete floor replacement. Landscape scattered sites.

Progress on Goals for 2005-2009

Community Room and Laundromat were completed as planned. Closet doors were postponed to enable the partial replacement of HVAC units (30) and security system consisting of 12 cameras and video monitor.

## VAWA Plan

In order to comply with the VAWA Public Law 109-162 signed into law on January 5, 2006, the following measures will be followed:

- 1) First and foremost, confidentiality will be the main objective when a report is received by the St. Charles Housing Authority consistent with VAWA.
- 2) When tenants receive a Section 8 Voucher or a Public Housing unit, they will be provided with a brochure explaining the VAWA. Additionally, they will sign an acknowledgement sheet stating that they received such information.
- 3) All tenants in Section 8 and Public Housing will receive a list of emergency numbers such as police departments, fire departments, hospitals, ambulances, and trauma centers that the housing authority has knowledge of in its jurisdiction.
- 4) All tenants Section 8 and Public Housing will have available to them the housing authority assistance in finding agency who supply assistance in obtaining employment.
- 5) All tenants Section 8 and Public Housing will have available to them a list of daycares that operate within this jurisdiction.
- 6) Additionally, names of shelters that assist families will be provided.
- 7) Additionally, all owners of Section 8 property will be issued a brochure explaining the VAWA.

### 11.0 RAB Comments

January 28, 2010 – RAB meeting:

Comment: Tenant would like for SCHA to find the funds to replace the wood of the dumpster enclosures.

Agency Response: Regular replacement of wood enclosures is in the yearly maintenance budget.

Comment: Tenant would like for SCHA to find the funds to caulk around all the windows in every unit to make them more energy-efficient.

Agency Response: Contacted City of St. Charles staff responsible for Community Development Block Grant distribution of funds to inquire about potential energy-efficiency resources that might be available to public housing tenants and their units. City is applying for Free Weatherization funding and will distribute information onsite when available. Agency will notify tenants in upcoming newsletters.

Comment: Tenant suggested that small shrubbery be planted around the units to beautify the area. Tenant understood that police would like for SCHA not to plant bushes for safety reasons but sees no reason why small shrubs can't be planted.

Agency Response: Landscaping budget has been included in agency plans for future years.

Comment: Tenants note that there had been no snow and ice removal currently. Tenants would like to see maintenance staff "salt" sidewalks during inclement weather.

Agency Response: Current agency policy, as per the lease, is that the agency will "use existing means available to it for removal or mitigation of the accumulated snow and ice when the PHA has actual notice of such condition and a reasonable time to act."

Comment: Tenant would like to see weatherization around the individual entrance doors and windows.

Agency Response: Contacted City of St. Charles staff responsible for Community Development Block Grant distribution of funds to inquire about potential energy-efficiency resources that might be available to public housing tenants and their units. City is applying for Free Weatherization funding and will distribute information onsite when available. Agency will notify tenants in upcoming newsletters.

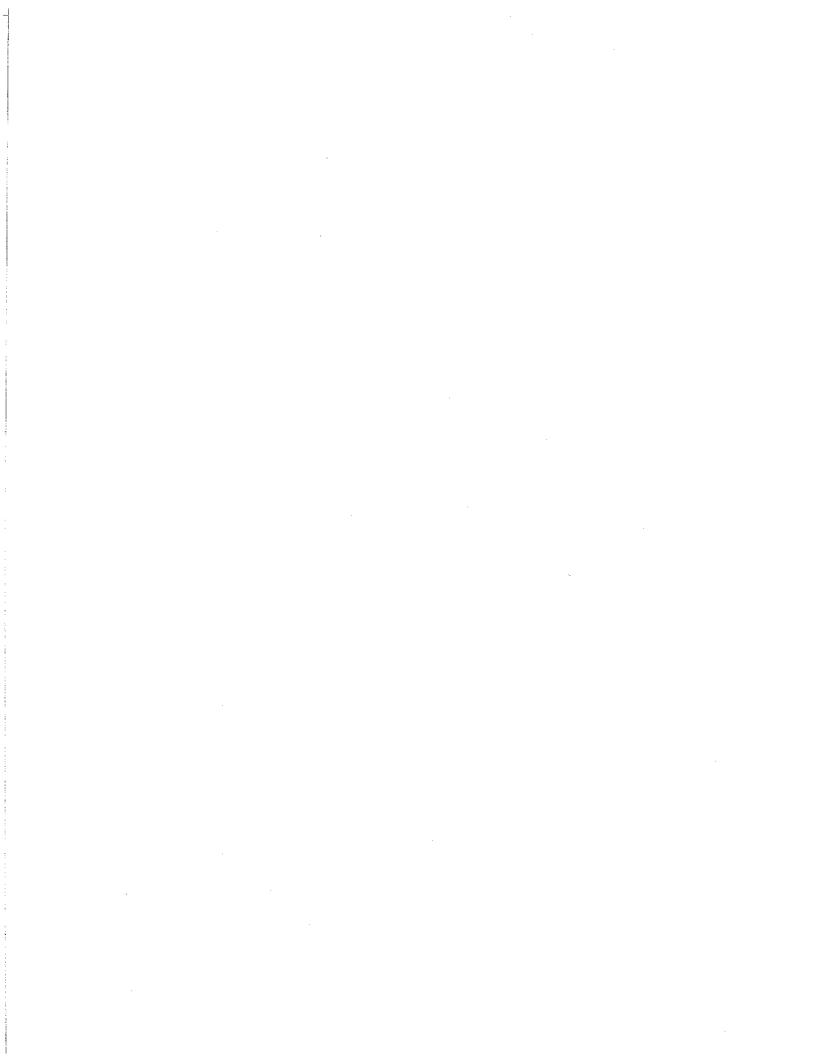
Z.	Ľ.	K.		J.	I.	H.	G.	F.	E.	D.	C	B.		Þ	PHA Auth	Pari
Grand Total	Total Non-CFP Funds	Total CFP Funds	Debt Service	Capital Fund Financing –	Development	Demolition	Operations	Other	Administration	PHA-Wide Non-dwelling Structures and Equipment	Management Improvements	Physical Improvements Subtotal		Development Number and Name	PHA Name/Number St. Charles Housing Authority MO006	Part I: Summary
												Astrovical Stratespecial	FFY 2010	Work Statement for Year 1	s Housing	
		117,000					59,200					57,800		Work Statement for Year 2 FFY 2011	Locality (St. Charles City, St. Charles County, Misso	
		117,000					59,200					57,800		Work Statement for Year 3 FFY 2012	St. Charles County, Missouri	
		117,000					59,200					57,800		Work Statement for Year 4 FFY 2013	X Original 5-Year Plan Revision No:	
		117,000					72,000					45,000		Work Statement for Year 5 FFY 2014	vision No:	

												Statement	SKRARIKA SKRARIKA			2010	Year 1 FFY	Work Statement for	Part II: Sup
Sub				Landscape	MO006-006				On Demand Water Heaters	MO006-002		On Demand Water Heaters	Magic Glide Severe Use Closet Doors	MO006-001	General Description of Major Work Categories	Number/Name	Development	Work Stat	Part III: Supporting Pages - Physical Needs Work Statement(s)
Subtotal of Estimated Cost				Clark Site (2 units)					5			6	150 Doors			Zuanierty	١	Work Statement for Year 2011 FFY	al Needs Work States
57,800				1,000					7,500			9,000	40,300			Farminion Coat	Estimated Cost		ment(s)
Sut				Landscape	MO006-006		-	Playground Base	On Demand Water Heaters	MO006-002		Playground Base	On Demand Water Heaters	MO006-001	General Description of Major Work Categories	Number/Name	Development	Work Sta	
Subtotal of Estimated Cost				Lewis Site (1 unit)				3,600 Sq. Feet	5			3,584 Sq. Feet	31			(aminit)	İ	Work Statement for Year: <u>2012</u> FFY	
57,800				1,000				1,403	7,500			1,397	46,500			Portunet Cook	Estimated Cost		

												///Statestatestat///	/ Scaranson				Year 1 FFY	Statement for	Work	Part II: Sup
Sub				·	Landscape	On Demand Water Heaters	MO006-006		On Demand Water Heaters	MO006-002			On Demand Water Heaters	MO006-001	General Description of Major Work Categories	Number/Name	Development		Work Stat	Part II: Supporting Pages - Physical Needs Work Statement(s)
Subtotal of Estimated Cost					Benton Site- 4 Units	6 Units			10 Units				21			,	Quantity	FFY	Work Statement for Year 2013	al Needs Work States
57,800					2,300	9,000			15,000				31,500				Estimated Cost			ment(s)
Sul				Shutters	Landscape	Landscape	MO006-006		Shutters	MO006-002	,	Shutters	Landscaping	MO006-001	General Description of Major Work Categories	Number/Name	Development		Work Sta	
Subtotal of Estimated Cost				12 Units	Grandview Site-2 Units	Spring Site –4 Units			10 Units			48 Units	20 units				Quantity		Work Statement for Year: 2014	
45,000				6,000	2,500	3,000			5,000			23,500	5,000				Estimated Cost			

Dant III. Can		Statement(a)			
Tait III ou	Tail III: Supporting rages - Management Meens work Statements	Statement(s)			
Work	Work Statement for Year 2011		Work Statement for Year: 2012		
Statement for	FFY		FFY		
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost	
_2010	General Description of Major Work Categories		General Description of Major Work Categories		
1111 XSSASSASA 1111	HA Wide		HA Wide		
[[] \$\$e\$e\$p\$p\$[]]	Operations	59,200	Operations	59,200	
	Subtotal of Estimated Cost	59,200	Subtotal of Estimated Cost	59,200	

										//Sustencent	// Aspersas	1118661111	Year 1 FFY	Statement for	Work	Part III: Suj
Subtotal of Estimated Cost										Operations	HA Wide		Development Number/Name General Description of Major Work Categories	FFY	Work Statement for Year2013	Part III: Supporting Pages - Management Needs Work Statement(s)
59,200			-					٠		59,200			Estimated Cost			Statement(s)
Subtotal of Estimated Cost										Operations	HA Wide		Development Number/Name General Description of Major Work Categories	FFY	Work Statement for Year:2014_	
72,000										72,000			Estimated Cost			



Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

Fart I: Summary	зиниагу				
PHA Nam the City of	PHA Name: The Housing Authority of the City of St. Charles  Grant Type and Number Capital Fund Program Grant No: MO36P00650107 Replacement Housing Factor Grant No:  Date of CFFP:	P00650107			FFY of Grant: 2007 FFY of Grant Approval:
Type of Grant ☐ Original A ☐ Performan	nnual Statement		☐ Revised Annual Statement (revision no: 1     ☐ Final Performance and Evaluation Report	ent (revision no: 1 ) Evaluation Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
,	Total non-CFP Funds			(	
2	1406 Operations (may not exceed 20% of line 21) 3	41,910	41,988	41,988	41,988
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit			***	
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
00	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	32,600	19,155	19,155	19,155
11	1465.1 Dwelling Equipment—Nonexpendable	34,900	45,189	45,189	45,189
12	1470 Non-dwelling Structures			•	
13	1475 Non-dwelling Equipment	þ	3,078	3,078	3,078
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				11.
17	1499 Development Activities '	1			-

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup>RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

_													_	_				_
	Signatur	25	24	23	22	21	20	19		18ba	18a		Line	Perfoi	Origin	Type of Grant	PHA Name: The Hosuing Authority of the City of St. Charles	Part I: Summary
1 or I wash	Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	Payment	9000 Collateralization or Debt Service paid Via System of Direct	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending:	Original Annual Statement   Reserve for Disasters/Emergencies	rant	e:  Grant Type and Number  Grant Type and Number  Capital Fund Program Grant No: MO36P00650107  Charles Charles Date of CFFP:	ummarv
01/57/1	Date /	34,800	-0-				109,410					•			mergencies			
0		0					10					Original	To					
	Signature of Publ	4	3				1						<b>Total Estimated Cost</b>					
	of Public Hous	45,189	3,078			ı	109,410					Revised 2	ed Cost	☐ Final	⊠ Revis		<b>7</b> 7	
	ic Housing Director	4	3				1							l Performan	sed Annual S		FFY of Grant:2007 FFY of Grant Approval:	
	tor	45,189	3,078				109,410					Obligated	To	☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no: 1		t:2007 t Approval:	
	Date	45,189	3,078				109,410					Expended	Total Actual Cost 1	rt .	1 )			
																		_

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages	A	<b>1</b>	Jařanaka			מיייים ו	30 7 Thank 30	3	
PHA Name: The housing Charles	PHA Name: The housing Authroity of the City of St. Charles	Grant Type and Capital Fund Proj CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: MO36P00650107 CFFP (Yes/No): Replacement Housing Factor Grant No:	: MO36P00650 ant No:	107	Federal I	Rederal EFY of Grant: 2007	<b>V</b> 7	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA Wide	Operations		1406		41,910	41,988	41,988	41,988	Complete
	Video Security system		1475	jamak.	-0-	3,078	3,078	3,078	Complete
MO006-001	Flooring Material		1460	9,800 Sq'	10,800	8,306	8,306	8,306	Complete
	Flooring Labor		1460	9,800 Sq '	9,800	10,351	10,351	10,351	Complete
	Closet Doors		1460	12 units	12,000	-0-	-0-	-Þ	n/a
	HVAC		1465.1	11 units	23,000	43,318	43,318	43,318	Complete
	Ranges		1465.1	9/1	3,400	557	557	557	Complete
	Refrigerators		1465.1	17/3	8,500	1,314	1,314	1,314	Complete
	Shower Doors		1460	0/4	-0-	498	498	498	Complete
		:							

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

					-						Name/PHA-Wide Activities	nber	FRA Nalie.	TITTA NT	Part II: Supporting Pages
											Categories	General Description of Major Work	Capital Fu Capital Fu CFFP (Yea Replaceme		
		:								·	Account No.		Capital Fund Program Grant No: Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:		
									,,,,,,			Quantity	nt No:		
										Original		Total Estima			
										Revised <sup>1</sup>		Estimated Cost	reuei ai i		
										Funds Obligated <sup>2</sup>		Total Actual Cost	Pedelal F.F. I. O. Crialic.		
										Funds Expended <sup>2</sup>		Cost			
												Status of Work			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: The housing Authority of the City of St. Charles	edule for Capital Fund thority of the City of S	Financing Program t. Charles			Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/07	12/31/08	12/31/07	1/12/10	
MO006-001	12/31/08	12/31/08	12/31/09	12/31/09	
			,		

<sup>&</sup>lt;sup>1</sup>Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

						-				Development Number Name/PHA-Wide Activities	PHA Name:	Part III: Implementation Schedule for Capital Fund Financing Program
			:						Original Obligation End Date	All Fund (Quarter E		edule for Capital Fund
									Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
,									Original Expenditure End Date	All Fund (Quarter I		
									Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
										Reasons for Revised Target Dates <sup>1</sup>	Federal FFY of Grant:	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

Tall					
PHA Nan	PHA Name: The Housing Authority of Grant Type and Number Capital Fund Program Grant No. MO36P00650108 Replacement Housing Factor Grant No. Date of CFFP:	9050108			FFY of Grant: 2008 FFY of Grant Approval:
Type of Grant □ Original Av □ Performan	nnual Statement		Revised Annual Statement (revision no:1   Final Performance and Evaluation Report	revision no:1 )	
Line	Summary by Development Account	Totall	Total Estimated Cost		Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	40,903	42,853.36	42,853.36	42853.36
3	1408 Management Improvements	:			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
6	1450 Site Improvement	13,477	5,089.64	5,089.64	5,089.64
10	1460 Dwelling Structures	14,012	16,793	16,793	16,793
11	1465.1 Dwelling Equipment—Nonexpendable	38,725	37,087	37,087	37,087
12	1470 Non-dwelling Structures	¢	5,294	5,294	5,294
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

form HUD-50075.1 (4/2008)

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

Date Expended 107.11741,164 Total Actual Cost 🔲 Final Performance and Evaluation Report ■ Revised Annual Statement (revision no: 1 Obligated FFY of Grant: 2008 FFY of Grant Approval: 107.117 41,164 Signature of Public Housing Director Revised<sup>2</sup> 107,117 41,164 Total Estimated Cost Original 107,117 38,724 Reserve for Disasters/Emergencies Date 9000 Collateralization or Debt Service paid Via System of Direct Grant Type and Number
Capital Fund Program Grant No: MO36P00650107
Replacement Housing Factor Grant No:
Date of CFFP: Amount of line 20 Related to Energy Conservation Measures 1501 Collateralization or Debt Service paid by the PHA Performance and Evaluation Report for Period Ending: Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Soft Costs 1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant: (sum of lines 2 - 19) Amount of line 20 Related to LBP Activities Summary by Development Account Signature of Executive Director Original Annual Statement Part I: Summary City of St. Charles Authority of the Type of Grant The Housing PHA Name: 18ba Line 18a 2 21 22 23 7

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Part II: Supporting Pages	8								
PHA Name: The Housing Charles	PHA Name: The Housinjg Authority of the City of St. Charles	Grant Type and Number Capital Fund Program Grant No: MO36P00650108 CFFP (Yes/ No): Replacement Housing Factor Grant No:	and Number Program Grant No: No): No): Housing Factor Grar	MO36P006501 nt No:	80	Federal I	Federal FFY of Grant: 2008	800	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA Wide	Operations	1406			40,903	42,853.36	42,853.36	40,903	Incomplete
	Computers	1475		4	-0-	5,294	5,294	5,294	Complete
MO006-001	Landscaping	1450		1 Building	2,000	1,764.64	1,764.64	1,764.64	Complete
MO006-002	Landscaping	1450		1 Building	2,000	1,898	1,898	1,898	Complete
MO006-001	Playground Base	1450		3584 Sq.	4,417	714	714	714	Complete
MO006-002	Playgorund Base	1450		3600 Sq.	2,060	713	713	713	Complete
MO006-001	Security Address Lights	1460		48 Units	-0-	996'9	996'9	996'9	Complete
MO006-002	Security Address Lights	1460		10 Units	-0-	1,427	1,427	1,427	Complete
MO006-001	Closet Doors	1460		5 Units	4,800	-0-	-0-	-0-	n/a
MO006-001	Flooring Material	1460		5500 Sq.'	4,312	4,312	4,312	4,312	Complete
MO006-001	Flooring Force Labor	1460		2603 Sq'	4,900	4,088	4,088	4,088	Complete
MO006-001	HVAC	1465.1		8 Units	34,900	34,900	34,900	34,900	Complete

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages	\$								
PHA Name: The Housing St.Charles	PHA Name: The Housing Authority of the City of St.Charles	Grant Tyl Capital Fu CFFP (Ye Replaceme	Grant Type and Number Capital Fund Program Grant No: MO36P00650108 CFFP (Yes/No): Replacement Housing Factor Grant No:	ant No:	108	Federal	Federal FFY of Grant: 2008	800	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
MO006-001	Refrigerator		1465.1	1	2,125	487	487	487	Complete
	Ranges		1465.1	4	1,700	1,700	1,700	1,700	Complete
:									
+									
,									

 $<sup>^1\,\</sup>mathrm{To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,\mathrm{To}$  be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant: 2008	Reasons for Revised Target Dates <sup>1</sup>										
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									
		All Fund: (Quarter E	Original Expenditure End Date	12/31/10	12/31/11	12/31/11						
Financing Program	St. Charles	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date	6/1/9	6)/30/06	60/08/6						
dule for Capital Fund	hroity of the City of	All Func (Quarter I	Original Obligation End Date	12/31/09	12/31/09	12/31/09						
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: The Hosuing Authroity of the City of St. Charles	Development Number Name/PHA-Wide Activities		HA Wide	MO006-001	MO006-002						

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

	Federal FFY of Grant:	nded Reasons for Revised Target Dates <sup>1</sup> Date)	Actual Expenditure End Date								
		All Funds Expended (Quarter Ending Date)	Original Expenditure End Date								
nd Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date								
redule for Capital Fur		All Fu (Quarter	Original Obligation End Date	;				-			
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities									

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

I ALL L	Fart I: Sublibary				
PHA Nan the City o	PHA Name: The Housing Authority of the City of St. Charles  Grant Type and Number Capital Fund Program Grant No: MO36S00650109 Replacement Housing Factor Grant No: Date of CFFP:				FFY of Grant 2009 FFY of Grant Approval:
Type of Grant Original A Performan	nnual Statement		<ul> <li>         ⊠ Revised Annual Statement (revision no: 1          ☐ Final Performance and Evaluation Report      </li> </ul>	nt (revision no: 1 ) Evaluation Report	
Line	Summary by Development Account	To	Total Estimated Cost	•	Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3				
3	1408 Management Improvements	3948	0		
4	1410 Administration (may not exceed 10% of line 21)	7 N			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
00	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	118,140	118,140	118,140	118140
11	1465.1 Dwelling Equipment—Nonexpendable	13,500	17,448	17,448	16,972
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

			Y CONTY DE LA	Ranges	MO006-006 Refrigerators	round de la	Ranges	Refrigerators	MO006-002   HVAC	Ranges	Refrigerators	MO006-001 HVAC		HA Wide Copy Machine		Activities		Development Number Gener	Charles	PHA Name: The Housing Authority of the City of St.	Part II: Supporting Pages
					itors			itors			itors			chine			Categories	General Description of Major Work	Capital CFFP ( Replac		
				1465.1	1465.1	1.0011	1465 1	1465.1	1460	1465.1	1465.1	1460		1408			Account No.	Development	Capital Fund Program Grant No: MO36S00650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Grant Type and Number	
			,	5	4	-	Δ	4	3	11	11	27	•	1			,	Quantity	:: MO36S00650		
			•	0	0	1,000	1 600	2,000	11,814	4,400	5,500	106,326	- 3	3,948	Original			Total Estim	109		
			t	1948	2,000	1,000	1 600	2,000	11,814	4,400	5,500	106,326		0	Revised 1			l Estimated Cost		Federal I	
				0	0	•	0	0	11,814	0	0	106,326		0	Funds Obligated <sup>2</sup>			Total Actual Cost		Federal FFY of Grant: 2009	
				0	0		0	0	0	0	0	35,442	,	0	Funds Expended <sup>2</sup>			Cost		009	
				Incomplete	Incomplete	moomorow	Incomplete	Incomplete	Incomplete	Incomplete	Incomplete	Incomplete	:	n/a				Status of Work			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:	<b>Q</b>	krant Ty Apital Fu FFP (Ye Leplacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal I	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
1 7 5	170 to a second for the December 2171 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		T	1					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: The Housing Authority of the City of St. Charles	edule for Capital Fund thority of the City of t	Financing Program St. Charles			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Func (Quarter F	All Fund Obligated (Quarter Ending Date)	All Funds Expend (Quarter Ending D	All Funds Expended Quarter Ending Date)	Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide					
Copy Machine	3/1/2010	n/a	6/30/2010	na	Removed fromn funding
MO006-001					
HVAC	12/31/09	12/31/09	3/31/2010		Waiting for unlocking of funds
Refrigerators	9/30/2010	2/10/2010	12/31/2010		Obtaining verification of USA Assembly
Ranges	9/30/09	2/10/2010	12/31/2010		Obtaining verification of USA Assembly
MO006-00 2					
HVAC	12/31/09	12/31/09	3/31/2010		Waiting for unlocking of funds
Refrigerators	9/30/2010	2/10/2010	12/31/2010		Obtaining verification of USA Assembly
Ranges	9/30/2010	2/10/2010	12/31/2010		Obtaining verification of USA Assembly
MO006-006					
Refrigerators	9/30/09	2/10/2010	12/31/2010		Obtaining verification of USA Assembly
Ranges	9/30/09	2/10/2010	12/31/2010	To the second se	Obtaining verification of USA Assembly

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Func (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
-					
			:		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: Summary	ummary			THE PARTY NAMED IN COLUMN TO THE PARTY NAMED	
the City of	PHA Name: The Housing Authority of the City of St. Charles  Grant Type and Number  Capital Fund Program Grant No: 36PMO36P00650109  Replacement Housing Factor Grant No:  Date of CFFP:	)36P00650109			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant Original A	pe of Grant Original Annual Statement Original Annual Statement Description Description Provided Englisher.		☐ Revised Annual Statement (revision no:1     ☐ Final Performance and Evaluation Report     ☐ Final Perfo	t (revision no:1 )	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	45,894	57,006	41,448	41,448
ယ	1408 Management Improvements	5,000	0	0	0
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
<b>∞</b>	1440 Site Acquisition				
9	1450 Site Improvement	4,000	4,000	0	0
10	1460 Dwelling Structures	30,212	24,100	2,436	2,436
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	30,000	30,000	0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				
		-			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Date	Director	Signature of Public Housing Director	Date 4/30/10	Signature of Executive Director	Signat
0	0	30,000	30,000	Amount of line 20 Related to Energy Conservation Measures	25
				Amount of line 20 Related to Security - Hard Costs	24
				Amount of line 20 Related to Security - Soft Costs	23
				Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
43,884	43,884	105,106	115,106	Amount of Annual Grant:: (sum of lines 2 - 19)	20
				1502 Contingency (may not exceed 8% of line 20)	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba
				1501 Collateralization or Debt Service paid by the PHA	18a
Expended	Obligated	Revised <sup>2</sup>	Original		
Total Actual Cost 1	Total A	Total Estimated Cost		Summary by Development Account	Line
	☐ Final Performance and Evaluation Report	☐ Final Per		Performance and Evaluation Report for Period Ending:	Per
	Revised Annual Statement (revision no: 1	⊠ Revised A	ncies	Original Annual Statement   Reserve for Disasters/Emergencies	<u>و</u>
				Type of Grant	Type of
	FFY of Grant:2009 FFY of Grant Approval:	FFY		Part I: Summary  PHA Name: The Housing Authority of the City of St. Charles  Capital Fund Program Grant No: MO36P00650109  Replacement Housing Factor Grant No:  Date of CFFP:	Part I: Sun PHA Name: The Housing Authority of City of St. Ch
Trapitos no or mora					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup>RHF funds shall be included here.

					MO006-006 I	)	F	MO006-001 F			HA Wide T		Activities	Development Number	PHA Name: The Housing Authority of the City of St. Charles	Dart II. Supporting Pages
			1		Landscaping	Closet Coors	Flooring Labor	Flooring material	in the state of th	Operations	Truck & Lift		Categories	General Description of Major Work		
														Vork	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	
					1450	1460	1460	1460		1406	1475		Account No.	Development	Grant Type and Number Capital Fund Program Grant No: MO36P00650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	
					4 Units	78 Doors	10,000 sq '	10,000 sq		n/a	1			Quantity	: MO36P006501	
					4,000	21,000	4,900	4,312	,	45,894		Original		Total Estima	[09	
					4,000	0	15,700	8,400		57006	30,000	Revised 1		Estimated Cost	Federal	
					0	0	0	0		41,448	0	Funds Obligated <sup>2</sup>		Total Actual Cost	Federal FFY of Grant: 2009	
					0	0	0	0		41,448	0	Funds Expended <sup>2</sup>		Cost	009	
					Incomplete	n/a	Incomplete	Incomplete		Incomplete	Incomplete			Status of Work		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:	<b>⊙</b>	rant Tyj apital Fu FFP (Yes eplaceme	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal I	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
									:
	-								
1 To be com	To be completed for the Darksmann and Evaluation Demont on Daving A Character		Daving A Statement	•					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Armual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: The Housing Authority of the City of St. Charles	dule for Capital Fund thority of the City of S	Financing Program t. Charles			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/11		12/31/12		
MO006-001	12/31/11		12/31/12		
MO006-006	12/31/11		12/31/12		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

										Development Number Name/PHA-Wide Activities	PHA Name:	Part III: Implementation Scheu
									Original Obligation End Date	All Func (Quarter F		dule for Capital Fund
									Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
		1							Original Expenditure End Date	All Fund (Quarter I		
									Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
										Reasons for Revised Target Dates	Federal FFY of Grant:	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: Summary	ummary				
PHA Name: The Housing St. Charles	PHA Name:  The Housing Authority of The City of Capital Fund Program Grant No: MO36P00650110  St. Charles Replacement Housing Factor Grant No:  Date of CFFP: 2010	)650110			FFY of Grant: 2010 FFY of Grant Approval:
Type of Gr	Type of Grant  ☑ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:	on <b>no:</b> )	
☐ Perform	n Report f		Final Performance and Evaluation Report	n Report	
Line	Summary by Development Account	Total Es	Total Estimated Cost		Total Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	86,950			
ιυ	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
20	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	13,000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
10	1460 Dwelling Structures	15,050			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Date	ic Housing Director	Signature of Public Hou	Date 7/23/10	Signature of Executive Director Path	Signat
				Amount of line 20 Related to Energy Conservation Measures	25
				Amount of line 20 Related to Security - Hard Costs	24
				Amount of line 20 Related to Security - Soft Costs	23
				Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
			115,000	Amount of Annual Grant:: (sum of lines 2 - 19)	20
				1502 Contingency (may not exceed 8% of line 20)	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba
				1501 Collateralization or Debt Service paid by the PHA	18a
Expended	Obligated	Revised <sup>2</sup>	Original		
Total Actual Cost 1	Total A	Total Estimated Cost		Summary by Development Account	Line
	Final Performance and Evaluation Report	☐ Fina		Performance and Evaluation Report for Period Ending:	Pe
	Revised Annual Statement (revision no:	☐ Revi	encies	Original Annual Statement   Reserve for Disasters/Emergencies	o o
				Type of Grant	Type of
	FFY of Grant:2010 FFY of Grant Approval:			Part I: Summary  PHA Name: The Housing Authority of The Capital Fund Program Grant No: MO36P00650110  City of St. Charles Date of CFFP:	Part I: Sun PHA Name: The Housing Authority of City of St. C

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.
<sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: The Housing Charles	PHA Name: The Housing Authority of The City of St. Charles	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: MO36P00650110 CFFP (Yes/No): Replacement Housing Factor Grant No:	: MO36P00650	110	Federal	Federal FFY of Grant: 2010	10	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA WIDE	Operations		1406	n/a	72,800	86,950			
	Copy Machine		1475	_	12,000	0			
MO006-001	Landscaping		1450	12 units	6,000	6,000			
	Flooring Material		1460	5,000 sq '	6,000	6,000			
	Flooring Force Labor		1460	5,000 sq1	6,000	7,850			
	Shutters		1460	3 units	800	800			
MO006-002	Landscaping		1450	6 units	3,000	3,000			
	Shutters		1460	2 units	400	400			
MO006-006	Landscapinbg		1450	8 units	4,000	4,000			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name:  PHA Name:  Development Number Name/PHA-Wide Activities	General Description of Major Work  Categories	Frant Tyl	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: Nork Development Account No.	ant No: Quantity	Total Estima	Estimated Cost  nal Revised 1	Federal FFY of Grant: 2010  Cost Total Actual Cost  vised Tunds Funds	Sost Funds	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
					- /				
									-
-									
1 70 %	1 To be committed for the Dorfe	2	7 4 A 1 C'atama					-	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: The Housing Authority of The City of St. Charles	dule for Capital Fund thority of The City o	Financing Program St. Charles			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/12		12/31/13		
MO006-001	12/31/12		12/31/13		
MO006-002	12/31/12		12/31/13		
MO006-006	12/31/12		12/31/13		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended

								Original Obligation End Date	Development Number  Name/PHA-Wide  Activities  Activities	PHA Name: e Housing Authority of The City of St. Charles
								Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)	of St. Charles
								Original Expenditure End Date	All Fund (Quarter	
	-							Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)	
						-			Reasons for Revised Target Dates	Federal FFY of Grant: 2010

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.